### Request for Immigration casework assistance (Homeland Security /Department of State - Visas ONLY)

The Privacy Act of 1974 requires congressional offices to obtain written authorization from a constituent before a federal agency may release any case-specific information regarding that individual to a Member of Congress, United States Senator, or their staff. Kindly complete and return this privacy release form to one of my district offices listed below. Family, friends, and other third parties are not able to authorize release of information on your behalf.

Kindly review the following instructions based on the benefit you are seeking from the federal government. Immigrant, non-immigrant and visa related benefits are divided into two types of cases, benefits where you are petitioning on behalf of another individual- a petition- and benefits you are seeking for yourself- an application.

#### **For Petitions:**

- 1- Complete the petitioner/applicant section of the release
- 2- Complete the beneficiary section of the release (unless you are petitioning on behalf of yourself.)

## For Applications:

1- Complete the petition/application section of the release.

\*\*\* For any type of case, you must provide a brief written description of the matter for which you are seeking assistance. If you require additional space for your description, you may attach it on separate page. If you do so, please write "description attached" in the description section.

Do not complete this form for passports, American Citizen Services aboard or letters of introduction on behalf of a relative. Refer to our Rep Dingell PRF.

To return by mail, please send to either one of my district offices to the attention of our constituent services team:

2006 Hogback Woodhaven City Hall Suite 7 21869 West Road Ann Arbor, MI 48105 Woodhaven, MI 48183

To return by e-fax 313-278-2936



# Office of Congresswoman Debbie Dingell (MI-6) Immigration Privacy Release Form

## Petitioner/ Applicant Section

When filing for an immigrant, non-immigrant or visa benefit for yourself or on behalf of another individual, please provide information in this section

provide information	in this section	
Identifying Infor	<u>mation</u>	
Prefix Full	Legal Name	
Date of Birth	Place of Birth (city and country)	Alien Number (if applicable)
Contact Informa	<u>tion</u>	
Street Address		
City, State, Zip code		
Mobile Phone	Email Address	
Alternate number (ij	fneeded)	
Case Information	<u>on</u>	
Case/ Receipt Numb	per(s) (i.e., USCIS Receipt, NVC Case Number)	Form Type(s)
Filing/Priority Date	Passport Number (for	non-immigrant case only
Beneficiary Information When filling for an in	mation: nmigrant benefit on behalf of another person, pleas	se provide their information in this section
Identifying Inform	<u>nation</u>	**
Prefix Full 1	Legal Name	
Date of Birth	Place of Birth (city and country)	Alien Number (if applicable)

Case Description Please provide a brief description of the matter for which you needed.	ou are seeking assistance. Continue additional page if
Have you contacted another Congressional office rega	arding your case? If yes, please list that office.
Privacy Statement	
I,(prin of perjury that 1) I provided or authorized all of this infor submitted with it; 2) I reviewed and understand all of the submitted with it; 3) all of this information is complete, to	information contained in my privacy release and
I authorize Congresswoman Debbie Dingell and her staft Department of Homeland Security (USCIS, CBP, ICE), of Justice (EOIR) relevant to the matter described above, in my file, and if necessary, to forward any pertinent conthose agencies.	U.S Department of State and/ or U.S Department to receive and review any information contained
Signature of Applicant/Petitioner Da	ate